think of the operation. I shall wait to hear from you again, and shall be most happy to assist you every way. Excuse haste, and believe me,

W. J. Mackarsie, Esq.

Yours truly,

MARSHALL HALL.

Clay-cross, Chesterfield, July 3, 1852.

DEAR SIR,—In reply to your kind favour received this morning, allow me to state that my patient, respecting whom I wrote to you, has suffered from epileptic fits for some years; the attack is *sudden*, throwing him forcibly upon the ground; he then struggles violently until he can take a full, free inspiration. For two or three minutes there is continued *crowing*, from the glottis being spasmodically closed; but immediately on his having a free inspiration, the fit leaves him, and he is then in a perfectly comatose state for some time. During the fit the face is much congested, the throat swollen, and the veins much distended. Of late his mental faculties have gradually become much impaired, and if there is any probability of its affording relief, his friends are extremely anxious that tracheotomy should be performed.

If not too intrusive, may I ask your opinion as to my adopting it? Any suggestions you may kindly offer will be much appreciated. I shall await a line before taking any further step; and thanking you for your kindness, remain, dear Sir,

Yours faithfully,

Dr. Marshall Hall.

W. J. MACKARSIE.

July 6, 1852.

DEAR SIR,—The advantage and propriety of tracheotomy are precisely in proportion to the laryngeal closure and obstruction to respiration. You are the judge of this; but, from your description, I am inclined to *recommend* it as most promising. In one case the diagnosis was wrong, and the remedy could of course avail nothing. All in medicine depends on diagnosis—is it not so?—and not in this case only. I have thought of a most simple mode of operating, which I will describe when I hear from you again. All, except this operation, is explained in my Croonian Lectures for 1850, 51, 52, which will be published in one volume by Messrs. Longman & Co., next week.

Yours, my dear Sir, very truly,

W. J. Mackarsie, Esq.

MARSHALL HALL.

Clay-cross, Chesterfield, July 8, 1852.

DEAR SIR,—In accordance with your kind favour last received, I again communicate with you in reference to my proposed operation of tracheotomy. I have seen the patient more than once since I heard from you, and what I have been able to ascertain as to his symptoms prior to, and when suffering from, the fits, strengthens my impression as to the propriety of the operation.

As I stated in my last, when seized with the fits, he falls instantaneously, and for two or three minutes appears quite unable to breathe, during which period he struggles and foams at the mouth. When he can first draw breath it is accompanied with a crowing sound; but so soon as he can breathe *freely*, the fit ceases, and he then lies for some time in a perfectly comatose state.

In the hope that it may, to some extent, benefit him, I am very desirous of performing the operation the early part of next week; in a district, however, so remote as this from the metropolis, it would be difficult for me to procure the necessary instruments, except directly from London, and as I could wish they should be good, and such as *fully* accord with your *modus operandi*, if not too great an intrusion, I should esteem it a favour if you would furnish me with the address where I *can best* obtain such instruments, and I will request a friend in London to procure them for me. I shall feel great pleasure in noting the progress of the case, and in furnishing you with any particulars of apparent interest.

I remain, dear Sir, yours faithfully,

Dr. Marshall Hall.

W. J. MACKARSIE.

10th July, 1852.

MY DEAR SIR,—I have written to Dr. W——, for the address of the instrument maker of whom he bought his trachéotome.

It should be of a good size, and a curved silver tube should be sent with it, which will be suitable to the orifice when made. I shall be anxious to know the progress and result of the case, and to communicate any further information in my power.

Pray return Dr. W——'s letter; and would it be too much trouble to send me copies of my two notes?

I am, my dear Sir, very truly yours,

W. J. Mackarsie, Esq.

M. HALL.

Clay-cross, Chesterfield, July 12th, 1852.

DEAR SIR,—I am exceedingly obliged by your kind communications in reference to my epileptic patient, and also for your writing to Dr. W——, from whom I this morning received a

note recommending me to Messrs. Weiss, of the Strand. I have written to them for a trachéotome, and on its arrival shall be anxious to operate; and I shall feel pleasure in reporting progress and result.

In one of your notes you alluded to a simple mode of operation you had thought of; if not too much trouble, would you favour me with a description of it?

I remain, dear Sir, yours very truly,

Dr. Marshall Hall.

W. J. MACKARSIE.

Clay-cross, 28th Sept. 1852.

DEAR SIR,—Understanding from your last that you would not return to town before the end of this month, I have delayed writing to you about my case of tracheotomy, which I performed *this day six weeks*; and although there were many anomalies in the case, and I have had many difficulties to contend with, still you will be pleased to learn that *he has not had one fit* since. I have kept minute notes of the case, and shall, when I know you have arrived in town, forward them to you. I really think this case ought to be published,—1st, on account of the beautiful success attending your most valuable suggestion, and 2nd, on account of the anomalies and difficulties encountered.

Waiting an intimation of your return,

I remain yours, very faithfully,

Dr. Marshall Hall.

W. J. MACKARSIE.

Clay-cross, Oct. 3rd., 1852.

DEAR SIR,—I enclose you a brief account of my case of tracheotomy. The man has now quite recovered, and looks more healthy than I have ever seen him. The attempt at the return of the fits is one most beautiful part of the case, showing the benefit of your operation; and again, although I have not observed it mentioned with respect to the faculties, which these fits always sooner or later impair, becoming improved by the fits being cured, still, I am led to believe, from this case, that the brain, although much impaired in *function* by their frequent recurrence, may, after a time, by the cause being removed, resume to a very great extent its normal action.

I grieve to see in the papers, that one patient has, within the last week, been allowed to die, without this mode of cure being put to the test. Although it will not cure *all* cases of epilepsy, still, where a fatal result is anticipated, and the breathing is laborious, no man ought to be afraid boldly to put in force your most valuable suggestion.

With many thanks for your kindness, allow me to remain,

Dear Sir, very faithfully yours,

Dr. Marshall Hall.

W. J. MACKARSIE.

RICH AND POOR; AND A WORD ON THE CARBUNCULAR EPIDEMIC.

To the Editor of THE LANCET.

SIR,—Free-trade has done great things for the medical philosopher; it has annulled, in great measure, the relative advantages and disadvantages of classes of society of the bygone age, and has possibly modified some of the specific diseases. The rich may now be said to be merged into the middle class, as far as the supply of the earth's bountiful productions is concerned; the means of sustenance hitherto, or in former years, so unequal and different, are now on a more equal footing; the luxuries easily and only attainable by the wealthy, are now within the reach of almost every one; the pine-apple the foreign fruits and wines, teas, coffees, and innumerable other luxuries, are now, vulgarly speaking, dirt cheap.

I am anxious, nevertheless, to divide society into only two classes, the rich and poor; and I should again divide these, for medical purposes, into the prudent rich and the imprudent rich, and the prudent poor and the imprudent poor.

I make this classification for the sake of utility; the prudent rich and poor apply the means at their command judiciously for the preservation of life, and which have been dictated by a high intelligence of the knowledge of the influence of right and wrong, indulgence and conduct. As derangement of health, disease, and death, are traceable, every day, to the violation of the ordinary laws of life, it appears to me therefore, that the much used expression of the sanitarians, "preventible diseases," as applied to the surreptitious power of stench, &c., as manufacturing specific diseases, is really and truly a gigantic error. No one will deny but that the gratification of our tastes and desires, without limit or control, is an all-powerful element in the maturing of any individual diseases of an hereditary nature, and ultimately destroying the body, and that to a greater ex-

tent than any coincident circumstance of the presence of any offensive abominations in the vicinity of such persons. It is time, then, that we should not allow any popular expression of opinion on one side of an important question to mislead the judgment of the medical man who is anxious to call things by their right names; and I apprehend that an error of this nature never would have gained currency if medical men had been selected to constitute the Board of Health.

Your readers will exclaim, what has rich and poor to do with the science and practice of medicine? I answer, a great deal. In your "Mirror of Medicine and Surgery" there was lately a remark about the prevalence of the carbunculoid disease; and a question is asked, whether, in private practice, persons of the upper and middle classes are equally affected with those who apply to hospitals. I have found the middle class of persons who have been in good condition of body at the period of attack, to be equally affected with the poor. I have seen this disorder in the prudent and imprudent, rich and poor, and have come to the conclusion that the purulent fermentative action induced by the epidemic constitution of the air is such, that you cannot rely on those who shall or who shall not suffer from its incursion. I have recently, since the subsidence of the carbuncular affection, met with a good deal of ulcerations, of the size of a pea, and sometimes of a bean, on the pharynx, velum, pendulum palati, uvula, and often of the mucous surface of the mouth. I have found this affection accompany other disorders; for instance, I had three children laid up with scarlet fever; in each of these was the presence of ulcers noticed, although no typhoid symptoms were indicated.

Free-trade will exhibit more and more its social advantages; diseases, or rather our nosology, will be simplified; the bounties of a wise Creator, gathered, by rail and steam, from the different zones of the earth, will be interchanged. The blood, it is hoped, of the Asiatic, tempered by diet of a more suitable or unexciting character, will partake less of the revengeful elements of his ancestors; the sanguinary dispositions of different nations may undergo some wholesome modification by change of diet; and thus may the universal brotherhood be accomplished, and thus we may be able to banish suffering, ill-health, and premature decay, to a greater extent than it is at present possible to conceive.

I am, Sir, your obedient servant,
J. C. ATKINSON, M.D.

Romney-terrace, Westminster, Sept., 1852.

THE HUNTERIAN SCHOOL OF MEDICINE, BEDFORD-SQUARE.

To the Editor of THE LANCET.

SIR,—I was glad to perceive, in the last number of your journal, that you said you could not recommend the Hunterian School. Not long since, I entered as a pupil to some of its classes. On the first day of my attendance I was admitted at a private door in Bedford-street. After descending a number of steps I found myself in a yard; on the right a door was opened, when I saw a "lecturer" and a number of dingy benches, but no students; I then entered the cellar (for cellar it was or had been) and, having ascended a ladder, found that the seats rested on a kind of scaffolding, and that the class consisted of two students, one of whom (fortunate fellow) was fast asleep. The noise, however, of footsteps (unusual sounds there) awoke him, and he stared, apparently with the utmost astonishment, on discovering that he was in a class amounting to three students. The somniferous powers, however, of Dr. Manson, the lecturer, proved too potent for the studious energies of my new companion, who, in a few minutes, was once more snugly embraced by the arms of Morpheus. So much for my first attendance. At my second visit I was about five minutes "behind time," when, on opening the door, I found the cellar without either drowsy lecturer or sleepy student. On asking the queer man in attendance where the lecturer was, he replied that "Dr. Manson has just been here, but as he found nobody to lecture to, has gone away again."

THE LANCET has always advised that students should enter to schools that belong to hospitals, or that are in immediate proximity with such clinical institutions; and, from experience, I can confidently aver that better advice cannot be given or followed. The entrance fee, in some instances, may be small with respect to its nominal amount in pounds sterling, but if loss of time be added to loss of cash, the "damage" to the student may prove to be incalculably heavy, as well as irreparably injurious.—I am, Sir, your obedient servant,

Southwark, Oct., 1852.

A MEDICAL PUPIL.

FIBRINOUS CONCRETIONS.

[NOTE FROM DR. OGLE.]

To the Editor of THE LANCET.

SIR,—Permit me, through your paper, to thank Dr. Garstang for his more detailed remarks in reply to my inquiries touching the case of supposed death from fibrinous concretions related by him. May I also state, in answer to his query, that in my remarks on the case I did not loosely speak from mere memory, but was fortified by the records of post-mortem examinations in St. George's Hospital, in which, as dutiful disciples of our own Hunter, we are wont to pay special attention to the condition of the blood and such coagula as may be found after death; noting the extent of fluidity or consistence, and examining as well the large thoracic and abdominal vessels as the cavities of the heart itself. In this respect, therefore, I should be glad to think that my observations in question were not altogether unreasonable or worthless. I fear that I was misunderstood also in what I said, for it was indeed remote from my intention to doubt, for one instant, the possibility or actual fact of the formation of fibrinous concretions in the heart during life, seeing that analogy and the affirmative testimony of such pathologists as Andral, Cruveilhier, Corvisart, Burns, Laennec, and Baillie, concur in favouring the view in question. I merely desired further particulars before I could conclusively arrange the case in point amongst those very few undeniable examples on record; numerous instances resembling the present one being certainly observed in ordinary post-mortem inspections, and under a variety of circumstances.

I beg to remain yours, &c.,

Queen-street, May-fair, Oct., 1852.

J. W. OGLE.

THE MEDICAL REFORM BILL.

To the Editor of THE LANCET.

SIR,—As the proposed Medical Reform Bill is now under consideration of the Committee appointed at the last meeting of the Provincial Society, at Oxford, I beg to suggest to these gentlemen, through the medium of THE LANCET, the propriety and advantage of having the Bill, when duly considered, printed in such a manner as to allow each paragraph or section to be remarked upon in writing, and sent gratuitously to every member of the society; and published at a small charge, so as to be procurable by every other member of the profession, not being of the Society, who felt disposed to apply for it, for examination. If these copies are made returnable, with remarks, to an appointed person, by him to be laid before the Committee, this body will thus be enabled, at a comparatively easy rate, to obtain the calm and unprejudiced opinions of a large majority of the profession, upon the principles and detail of the proposed measure.

I am, Sir, yours &c.,

October, 1852.

M. D. X.

* * We consider that the suggestion of our correspondent is a valuable one, and that it may be adopted by the Committee with much advantage to the profession.—ED. LANCET.

THE DEGRADATION OF THE TITLE OF M.D.

To the Editor of THE LANCET.

SIR,—I am a physician, well stricken in years, and cannot fail, as must every careful observer, to notice the gradual declension of the medical profession in social estimation and position. Reflecting on what can be the cause of this, I have come to the conclusion that the most potent is the vulgarization of the title of M.D. When I commenced practice, the physician was always regarded as a gentleman, and met with the consideration due to a gentleman in society, and the degree of M.D. was then respected as indicative of the man of polite education, as well as of superior professional attainments. He was, in fact, the connecting link between the profession and the aristocracy, of birth and talent, and it was due to the status of the pure physician that the profession of physic was ever regarded as a polite calling rather than a trade. Now how changed is the state of things! So far from now representing the man of university education and prolonged professional study, it is assumed by every one fresh emancipated from the rolling of pills and mixing of potions, and is paraded by men who draw teeth for a shilling, and "vaccinate gratis." Can it be a matter of surprise that when Doctor A. is seen tugging at an obstinate upper molar, and even eclipses his opposite neighbour the chemist in the blue and red glories of his shop window, that the title should sink in public estimation. How deplorably it has been lowered by such doings, can only be appreciated by those who, like myself, have